

**COUNTY OF SAN LUIS OBISPO BOARD OF SUPERVISORS  
AGENDA ITEM TRANSMITTAL**

(1) DEPARTMENT <b>Auditor-Controller</b>	(2) MEETING DATE <b>July 18, 2006</b>	(3) CONTACT/PHONE <b>M. Estrella (805) 781-5040</b>	
(4) SUBJECT <b>Submittal of our audit report on the District Attorney's Spousal Abuser Prosecution Program Grant for the period July 1, 2004 through June 30, 2005.</b>			
(5) SUMMARY OF REQUEST <b>The objective of the review was to verify that the District Attorney's Spousal Abuser Prosecution Program Grant is complying with the State of California Department of Justice program guidelines. We determined in the course of our review that the department is applying adequate internal controls and is in compliance with DOJ program guidelines for the period July 1, 2004 through June 30, 2005.</b>			
(6) RECOMMENDED ACTION <b>Please review the audit report for your information. No departmental response is required.</b>			
(7) FUNDING SOURCE(S) <b>N/A</b>	(8) CURRENT YEAR COST <b>N/A</b>	(9) ANNUAL COST <b>N/A</b>	(10) BUDGETED? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A
(11) OTHER AGENCY/ADVISORY GROUP INVOLVEMENT (LIST): <b>None</b>			
(12) WILL REQUEST REQUIRE ADDITIONAL STAFF? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, How Many? _____ <input type="checkbox"/> Permanent _____ <input type="checkbox"/> Limited Term _____ <input type="checkbox"/> Contract _____ <input type="checkbox"/> Temporary Help _____			
(13) SUPERVISOR DISTRICT(S) <input type="checkbox"/> 1st, <input type="checkbox"/> 2nd, <input type="checkbox"/> 3rd, <input type="checkbox"/> 4th, <input type="checkbox"/> 5th, <input checked="" type="checkbox"/> All		(14) LOCATION MAP <input type="checkbox"/> Attached <input checked="" type="checkbox"/> N/A	(15) Maddy Act Appointments Signed-off by Clerk of the Board <input checked="" type="checkbox"/> N/A
(16) AGENDA PLACEMENT <input checked="" type="checkbox"/> Consent <input type="checkbox"/> Hearing (Time Est. _____) <input type="checkbox"/> Presentation <input type="checkbox"/> Board Business (Time Est. _____)		(17) EXECUTED DOCUMENTS <input type="checkbox"/> Resolutions (Orig + 4 copies) <input type="checkbox"/> Contracts (Orig + 4 copies) <input type="checkbox"/> Ordinances (Orig + 4 copies) <input checked="" type="checkbox"/> N/A	
(18) NEED EXTRA EXECUTED COPIES? <input type="checkbox"/> Number: _____ <input type="checkbox"/> Attached <input checked="" type="checkbox"/> N/A		(19) BUDGET ADJUSTMENT REQUIRED? <input type="checkbox"/> Submitted <input type="checkbox"/> 4/5th's Vote Required <input checked="" type="checkbox"/> N/A	
(20) OUTLINE AGREEMENT REQUISITION NUMBER (OAR) _____		(21) W-9 <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	(22) Agenda Item History <input checked="" type="checkbox"/> N/A    Date _____
(23) ADMINISTRATIVE OFFICE REVIEW  <div style="text-align: center; font-size: 1.5em; font-family: cursive;">M. Estrella</div>			

7-18-06  
B-9

**County of San Luis Obispo**  
**Office of the Auditor-Controller**  
1055 Monterey Street Room D220  
San Luis Obispo, California 93408  
(805) 781-5040 FAX (805) 781-1220



**GERE W. SIBBACH, CPA**  
**BILL ESTRADA, Assistant**  
**JAMES ERB, CPA, Deputy**  
**LYDIA CORR, CPA, Deputy**

TO: HONORABLE BOARD OF SUPERVISORS

FROM: GERE W. SIBBACH, AUDITOR-CONTROLLER *by BE*

DATE: JULY 18, 2006

SUBJECT: SUBMITTAL OF OUR AUDIT REPORT ON THE DISTRICT ATTORNEY'S  
SPOUSAL ABUSER PROSECUTION PROGRAM GRANT FOR THE PERIOD  
JULY 1, 2004 THROUGH JUNE 30, 2005.

Recommendation

Please review the report for your information. No departmental response is required.

Discussion

The objective of the review was to verify that the District Attorney's Spousal Abuser Prosecution Program Grant is complying with the State of California Department of Justice program guidelines. We determined in the course of our review that the department is applying adequate internal controls and is in compliance with DOJ program guidelines for the period July 1, 2004 through June 30, 2005.

Other Agency Involvement/Impact

None

Financial Considerations

Total grant funds awarded were \$33,261 plus \$6,652 in County matching funds, with total grant expenditures claimed of \$39,913.

Results

The Auditor-Controller's Program of periodic operational compliance audits is intended to verify compliance with current administrative and statutory requirements and improve internal controls and procedures.

*B-9  
2*

**County of San Luis Obispo**  
**Office of the Auditor-Controller**  
1055 Monterey Street Room D220  
San Luis Obispo, California 93408  
(805) 781-5040 FAX (805) 781-1220



**GERE W. SIBBACH, CPA**  
**BILL ESTRADA, Assistant**  
**JAMES ERB, CPA, Deputy**  
**LYDIA CORR, CPA, Deputy**

June 26, 2006

Gerald T. Shea, District Attorney  
San Luis Obispo County District Attorney's Office  
Room 450, County Government Center  
San Luis Obispo, CA 93408

Dear Mr. Shea:

Our office recently completed a review of the State of California Department of Justice Spousal Abuser Prosecution Program Grant for the period of July 1, 2004 through June 30, 2005.

Purpose

The objective of the review was to verify that the District Attorney's Spousal Abuser Prosecution Program Grant is complying with the State of California Department of Justice program guidelines.

Scope

In the course of the audit, we reviewed Grant payments received, allowable expenditures, including hours of staff assigned to the Grant, department's internal controls, and statistics of cases used to measure grant performance.

Finding and Recommendations

We found the office is applying adequate internal controls and is in general compliance with the grant guidelines.

We would like to express our appreciation for the cooperation given by the District Attorney's staff during the audit.

Sincerely,

Gere W. Sibbach, CPA  
Auditor-Controller

Norman L. Booth, CPA  
Chief Internal Auditor

B-9  
3